NEVADA DISCLOSURE OF REPRESENTATION OR COUNSELING OF A PRIVATE PERSON BEFORE A STATE AGENCY OF THE EXECUTIVE BRANCH

	ADDITIONAL PAGE _	OF
DEDOGNAL INCODIATION		
PERSONAL INFORMATION: NAME:		TITLE OF PUBLIC OFFICE:
I HEREBY DISCLOSE that during constate agency of the executive branch	alendar year that had hereby make a disclosure of such r	represented or counseled a private person for compensation before a epresentation, pursuant to NRS 281A.410.3.
NAME OF CLIENT:		
NATURE OF REPRESENTATION:		
NAME OF STATE AGENCY:		
	<u></u>	
NAME OF CLIENT:		
NATURE OF REPRESENTATION:		
NAME OF STATE AGENCY:		
NAME OF CLIENT:		
NATURE OF REPRESENTATION:		
NAME OF STATE AGENCY:		